B) (1/08)						
10-317	United States Bar	nkruptcy Court 10 - 3	1791	1 Voluntary Petition		
Name of Debtor (if individual, enter l Coogan, Angenetta, Marie	Last, First, Middle	e):	Name of Joint Coogan,	nt Debtor (Spouse) (Last, First, Middle): Cary, Shane		
All Other Names used by the Debtor (include married, maiden, and trade n			All Other Nar	ames used by the Joint Debtor in the last 8 years ried, maiden, and trade names):		
Angenetta Davis	unics).		(merade mari	ned, marden, and dade maries).		
Last four digits of Soc. Sec. or Indvid (if more than one, state all): 8803	lual-Taxpayer I.D.	. (ITIN) No./Complete EIN	Last four digit (if more than 1977	its of Soc. Sec. or Indvidual-Taxpayer I.D. (ITIN) No./Complete EIN one, state all):		
Street Address of Debtor (No. and Str	-	te):		ss of Joint Debtor (No. and Street, City, and State):		
19930 Limelight Drive, No Bend, OR	415		Bend, OR	melight Drive, No 415 R		
Control CD ill according to the District	-1 DI CD	ZIP CODE 97702	O mi of D	ZIP CODE 97702		
County of Residence or of the Princip Deschutes			Deschute			
Mailing Address of Debtor (if differe Same As Above	nt from street add	ress):	Same As	ress of Joint Debtor (if different from street address): Above		
Location of Principal Assets of Busin	ess Debtor (if diff	ZIP CODE ferent from street address above):		ZIP CODE		
Type of Debtor		Nature of Busine		ZIP CODE Chapter of Bankruptcy Code Under Which		
(Form of Organization	n)	(Check one box.)	33	the Petition is Filed (Check one box.)		
(Check one box.) Individual (includes Joint Debto See Exhibit D on page 2 of this Corporation (includes LLC and Partnership Other (If debtor is not one of the check this box and state type of	form. LLP) e above entities,	Health Care Business Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank		Chapter 7		
				Nature of Debts (Check one box.)		
		Tax-Exempt Ent (Check box, if applied Debtor is a tax-exempt of	cable.)			
		under Title 26 of the Un Code (the Internal Rever		individual primarily for a personal, family, or house-hold purpose."		
Filing F	ee (Check one bo	x.)	Check one bo	Chapter 11 Debtors		
Full Filing Fee attached.				is a small business debtor as defined in 11 U.S.C. § 101(51D).		
Filing Fee to be paid in installm signed application for the court' unable to pay fee except in insta	s consideration ce	ertifying that the debtor is	Debtor i	is not a small business debtor as defined in 11 U.S.C. § 101(51D).		
Filing Fee waiver requested (appattach signed application for the	plicable to chapter	r 7 individuals only). Must	☐ Debtor's	's aggregate noncontingent liquidated debts (excluding debts owed to s or affiliates) are less than \$2,190,000.		
anden signed approaches for the	court s considera	inon. See official Form 3B.	A plan is Accepta	plicable boxes: is being filed with this petition. ances of the plan were solicited prepetition from one or more classes litors, in accordance with 11 U.S.C. § 1126(b).		
Statistical/Administrative Informat	ion		or crear	THIS SPACE IS FOR		
Debtor estimates that funds Debtor estimates that, after distribution to unsecured c	any exempt prope	for distribution to unsecured cred erty is excluded and administrative	litors. e expenses paid	d, there will be no funds available for		
Estimated Number of Creditors						
1-49 50-99 100-199	200-999		0,001- 25	5 001 50 001		
Estimated Assets	o \$500,001 to \$1	to \$10 to \$50 to	\$0,000,001 \$1 \$100 to	0,000 100,000 00,000 1		
Estimated Liabilities	o \$500,001 to \$1	to \$10 to \$50 to	\$0,000,001 \$1 \$100 to	\		

3 1 (Official Form 1) (1/08)		Page 2			
Voluntary Petition	Name of Debtor(s): Angenetta and Cary Coogan				
(This page must be completed and filed in every case.) All Prior Bankruptcy Cases Filed Within Last 8					
Location Where Filed: Portland, Oregon Chapter 7	Case Number: 232033	Date Filed: 03/2002			
Location Where Filed: Portland, Oregon Chapter 13	Case Number: 08-36665	Date Filed: 12/2008			
Pending Bankruptcy Case Filed by any Spouse, Partner, or Aff					
Name of Debtor:	Case Number:	Date Filed:			
District:	Relationship:	Judge:			
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)					
Exhibit A is attached and made a part of this petition.	X Signature of Attorney for Debtor(s)	(Date)			
Exhibi	it C				
Does the debtor own or have possession of any property that poses or is alleged to pos		iblic health or safety?			
Yes, and Exhibit C is attached and made a part of this petition.					
No.					
<u> </u>					
Exhib					
(To be completed by every individual debtor. If a joint petition is file	ed, each spouse must complete and attac	h a separate Exhibit D.)			
Exhibit D completed and signed by the debtor is attached and	made a part of this petition.				
If this is a joint petition:					
Exhibit D also completed and signed by the joint debtor is att	ached and made a part of this petition.				
Information Regarding	the Debtor - Venue				
(Check any app Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 d	licable box.) of business, or principal assets in this District for	180 days immediately			
There is a bankruptcy case concerning debtor's affiliate, general pa	rtner, or partnership pending in this District.				
Debtor is a debtor in a foreign proceeding and has its principal planes no principal place of business or assets in the United States but this District, or the interests of the parties will be served in regard to	t is a defendant in an action or proceeding [in a fe				
Certification by a Debtor Who Resides (Check all applie					
Landlord has a judgment against the debtor for possession of del	btor's residence. (If box checked, complete the fo	ollowing.)			
	(Name of landlord that obtained judgment)				
	(Address of landlord)				
Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for posses					
Debtor has included with this petition the deposit with the court filing of the petition.	of any rent that would become due during the 30-	day period after the			
Debtor certifies that he/she has served the Landlord with this cer	rtification. (11 U.S.C. § 362(I)).				

B 1 (Official Form) 1 (1/08)	Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case.)	Angenetta and Cary Coogan
Signa	
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Signature of both Debtor Signature of both Debtor Telephone Number (if not represented by attorney) 3-14-2010	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached. Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. X (Signature of Foreign Representative) Date
Date	
Signature of Attorney* X Signature of Attorney for Debtor(s) Printed Name of Attorney for Debtor(s) Firm Name Address Telephone Number Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Signature of Debtor (Corporation/Partnership)	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. §§ 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Printed Name and title, if any, of Bankruptcy Petition Preparer Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.
X Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual Date	Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

UNITED STATES BANKRUPTCY COURT

In re Angenetta & Cary Coogan	Case No	
Debtor		(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop conditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a sequente F. lide't D. Charle must file fire statements in low and attaching documents as directed.

- I Within the 180 days before the filing of my hankruptey case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptey administrator that outlined the opportunities for available credit counseling and essisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Ittach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- ☐ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed

☐ 3. I certify that I requested credit counseling services from an approved agency but
was unable to obtain the services during the seven days from the time I made my request, and the
following exigent circumstances merit a temporary waiver of the credit counseling requirement
so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill three requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for eause and is limited to a maximum of 15 days. Vour case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit connecting beiefing

□ 4. I am not required to receive a credit counseling briefing because of: ICheck the applicable statement.] [Must be accompanied by a motion for determination by the court.]

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: Angenetta Caza

Date: 34-10

United States Bankruptcy Court

In re Angenetta & Cary Coogan	Case No.	
Debtor		(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

- □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
 - ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
 - ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
 - ☐ Active military duty in a military combat zone.
- ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: Cay Cay

Date: 3-4-10

	UNITE			JRT		
Angenetta & Cary Coogan 8803 1977)	EXHIB [NOTE: Must be	IT "C-1" be <u>FULLY</u> comp		Potition 1	
1. DESCRIBE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION: None, All assets are claimed assets: 19430 (No. 1970) 3. The BANKRUPTCY DOCUMENT PREPARER DECLARATION below has been completed for any person who helper for compensation, prepare any of the bankruptcy papers if the debtor does not have an attorney. I declare under penalty of perjury that the above information provided in this Exhibit "C-1" is true and correct. DATE: 3-4-10 BANKRUPTCY DOCUMENT PREPARER DECLARATION BANKRUPTCY DOCUMENT PREPARER DECLARATION I, the undersigned, declare under penalty of perjury that (1) neither!, nor anyone else listed harring sollected or received any payment from or on behalf of the debtor for court fees in connection with hitself the sollected are received any payment from or on behalf of the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (3) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4) \$ is the debtor within the previous 12 month period; (4)	N" is <u>NOT</u>					
EXHIBIT "C-1"						
1993	o Linelial	4 01 #1	115			
						rho helped,
I declare under penalty of pe	rjury that the above	information provi	ded in this Exhi	bit "C-1" is tru	e and correct.	
DATE: 3-4-10	Debtor's Signatu	- 900000	3-4 Phone	* Joint	Debtor's Signature	7
	BANKRUPTC	Y DOCUMENT PI	REPARER DEC	CLARATION		
any payment from or on be	DISTRICT OF OREGON Case No. EXHIBIT "C-1" [NOTE: Must be FULLY completed by ALL debtors, and attached to ALL copies of the Petition.] EE: You must answer ALL questions. Attach additional sheets if necessary. Use of "UNKNOWN" is NOT ptable!) ESCRIBE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION: Norte, All counts are claimed assets: (CARCHE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION: Norte, All counts are claimed assets: (CARCHE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION: Norte, All counts are claimed assets: (CARCHE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION: BEANKRUPTCY DOCUMENT PREPARER DECLARATION below has been completed for any person who helped, recompensation, prepare any of the bankruptcy papers if the debtor does not have an attorney. are under penalty of perjury that the above information provided in this Exhibit "C-1" is true and correct. E. 3 -4 -1					
	grand grown in the second second process of the second second					
jequnqû e j grêwe <u>êva</u> jirwi î î						
eudzeda i jilike uz prudi.						
Lact 4 digits of Social Security	DISTRICT OF OREGON Case No					
	DISTRICT OF OREGON Case No					
[NOTE: Penalties up to \$50) per item may be	DISTRICT OF OREGON Case No EXHIBIT "C-1" [NOTE: Must be FULLY completed by ALL debtors, and attached to ALL copies of the Petition.] Ins. Attach additional sheets if necessary. Use of "UNKNOWN" is NOT STEE'S IMMEDIATE ATTENTION: Clauned as exempt. ARER DECLARATION below has been completed for any person who helped, bankruptcy papers if the debtor does not have an attorney. ARER DECLARATION below has been completed for any person who helped, bankruptcy papers if the debtor does not have an attorney. Brown information provided in this Exhibit "C-1" is true and correct. Correct 3-4-10 Phone # Joint Debtor's Signature Procy DOCUMENT PREPARER DECLARATION Of perjury that (1) neither I, nor anyone else listed basein, collected or received the debtor within the previous 12 month period; (3) \$ is the contaction with true and correct.				
barqin siili i Saasaan saasaa	DISTRICT OF OREGON Case No					

In an	Open No.
Angenetta & Cary Coogan 8803	23181311 13 2 18030 0131181 13 13 13 13 13 13 13 13 13 13 13 13 13
1977	
Debtor(s)	PER 11 U.S.C. §521(a)
11 SUCK AND ER E this town avan it you show "N/ Mil-	" ABILL it creditors are listed, have the popular certificate (*/1880); E.L.D. ABILL
	** AND it creditors are listed, have the service certificate COMPLETED: AND
11 HSC §341(a) may result in relief for the creditor from	the Automatic Stay protecting such property
the estate. Attach additional pages is necessary.)	
4	
Property ric :	i i
Greator's name:	: Describe Property Securing Debt:
	1
Property will be (check one) SURRENDERED	RETAINED
; in retaining the proberty, i intend to reneek at locast one	9.
Redeem the property	
Reaffirm the debt Other Explain (for example, avoid lien using 1111)	SC 8572/01
Property is (check one): CLAIMED AS EXEMPT	NOT CLAIMED AS EXEMPT
I property No. 2 (in necessary)	1
Creditor's Name:	Describe Property Securing Debt:
1	
Property will be (check one): SURRENDERED	□ RETAINED
In retaining the property, Fintend to (check at least one ☐ Redeem the property)
Reaffirm the debt	
Other. Explain (for example, avoid lien using 11 US	SC §522(f))
Property is (check one): CLAIMED AS EXEMPT	□ NOT CLAIMED AS EXEMPT
Property No. 3 (if necessary) Creditor's Name:	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one): SURRENDERED	RETAINED
if retaining the property, I intend to (check at least one,).
Redeem the property	
Reaffirm the debt	SC 8532/8)
Other. Explain (for example, avoid lien using 11 US	
Property is (check one): CLAIMED AS EXEMPT	☐ NOT CLAIMED AS EXEMPT
521.05 (12/1/08) Page 1 of 2	

PART A - Continuation	R 7 INDIVIDUAL DEBTO (Continua	tion Sheet)	
Property No. 4]	
Creditor's Name:		Describe Property	Securing Debt:
Property will be (check one): SURRE	ENDERED RETA	AINED	
· ·	_ _		
If retaining the property, I intend to (chec Redeem the property	k at least one):		
Reaffirm the debt			
Other. Explain (for example, avoid lie	n using 11 USC §522(f))_		
Property is (check one): CLAIMED A	S EXEMPT NO	T CLAIMED AS EXEM	MPT
Property No. 5 (if necessary)		<u> </u>	
Creditor's Name:		Describe Property	Securing Debt:
Property will be (check one): SURRE	ENDERED RETA	I AINED	
If retaining the property, I intend to (chec	k at least one):		
Redeem the property			
Reaffirm the debt Other. Explain (for example, avoid lie	n using 11 USC 8522(fl)		
Property is (check one): CLAIMED A	S EXEMPT NO	CLAIMED AS EXEM	MPT
Property No. 6 (if necessary)			
Creditor's Name:		Describe Property	Securing Debt:
Property will be (check one): SURRE	NDERED RETA	INED	
If retaining the property, I intend to (check	(at least one):		
Redeem the property	varieusi onej.		
Reaffirm the debt			
Other. Explain (for example, avoid lie	n using 11 USC §522(f))_		
Property is (check one): CLAIMED A	S EXEMPT NO	CLAIMED AS EXEM	PT
PART B - Continuation	_		
Property No. 4			
Lessor's Name:	Describe Leased Pr	operty:	Lease will be assumed pursuant to 11 USC §365(p)(2):
			YES NO
Property No. 5 (if necessary)			
Lessor's Name:	Describe Leased Pr	operty:	Lease will be assumed pursuant to
			11 USC §365(p)(2): ☐ YES ☐ NO
Property No. 6 (if necessary)			
Lessor's Name:	Describe Leased Pr	operty:	Lease will be assumed pursuant to
			11 USC §365(p)(2): ☐ YES ☐ NO

521 05 (12/1/08) Page 3

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.) Property No. 1 Lessor's Name: Describe Leased Property: Lease will be assumed pursuant to 11 USC §365(p)(2): YES NO. Property No. 2 (if necessary) Lessor's Name: Describe Leased Property: Lease will be assumed pursuant to 11 USC §365(p)(2): ☐ YES ■ NO Property No. 3 (if necessary) Lessor's Name: Describe Leased Property: Lease will be assumed pursuant to 11 USC §365(p)(2): □ YES □ NO Continuation sheets attached (if any). I/WE THE UNDERSIGNED, CERTIFY THAT COPIES OF BOTH I DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE THIS DOCUMENT AND LOCAL FORM #715 WERE SERVED ON INDICATES INTENTION AS TO ANY PROPERTY OF MY ESTATE SPOURING A DERT AND HOUSE DESCRIPTION OF THE SEASON OF THE ANY CREDITOR NAMED ABOVE NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS Creditors, see Local Form #715 (attached if this document was served on paper) if you wish information on how to obtain NON-JUDICIAL calcilitati indiadomalia ciay of 11 O S C. §3652(a) as lo your condictor OHESTIONS9999 First an attending with consultance and researched and antique on the case of the many particles of the constraint and the cons

B6	Summary	(Official	Form 6 -	Summary)	(12/07)
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United States Bankruptcy Court

In re_	Angenetta & Cary Coogan	,	Case No.
	Debtor		Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 20,000.00		
B - Personal Property	Yes	3	\$ 5,180.00	· · · · · ·	
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		\$ 7,798.98	-
F - Creditors Holding Unsecured Nonpriority Claims	Yes	17		\$ 152,535.28	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1	_		_
I - Current Income of Individual Debtor(s)	Yes	1			\$ 1,138.00
J - Current Expenditures of Individual Debtors(s)	Yes	1			\$ 1,519.00
Т	OTAL	31	\$ 25,180.00	\$ 160,334.26	

United States Bankruptcy Court

In re Angenetta & Cary Coogan Debtor	Case No
	Chapter _7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	An	nount
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	4,559.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	42,570.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	47,129.00

State the following:

Average Income (from Schedule I, Line 16)	\$ 1,138.00
Average Expenses (from Schedule J, Line 18)	\$ 1,519.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 1,273.34

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 4,559.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 3,239.98
4. Total from Schedule F		\$ 152,535.28
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 7,798.98

	Debtor		_	(If known)	_
In re	Angenetta & Cary Coogan	,	Case No.		
B0A (Official Form 6A)(12/07)				

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Location:19930 Limelight Drive, No 415, Bend, OR 97702 Mobile Home, in Mobile park property rented. Living in home.	Mobile Home Owner	J	20,000.00	0.00
	Tol	al►	20,000.00	

(Report also on Summary of Schedules.)

B 6B (Official Form 6B) (12/07)	
In re Angenetta & Cary Coogan,	Case No
Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

The option diseased below that all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, and the categories is needed in any entegory, attach a separate sheet properly the arm of the category attach as expande sheet properly the arm of the category attach as expande sheet properly the arm of the categories, and the categories are the categori

The medited informacy bear surrounce; communicated and are explosited in a soluble to the Thirds as his School and C. The many Continue and

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TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand	Х			
2. Checking savings or other finan- cial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and home- stead associations or credit unions brokerage houses, or cooperatives.		Bank of America, Bend, OR Acct# 3481 (\$240) from unemployment	J	240.00
Security deposits with public utilities, telephone companies, landlords, and others.	х			
Household goods and furnishings, including audio, video, and computer equipment.		2 TV(\$500),Comp.(\$200),Couch & Chair(\$200), Ktchware(\$500),Bed(\$100),Wshr & Dryr(\$200)	J	1,700.00
Books: pictures and other art objects, antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles		Books (\$20), Pictures (\$150), 2 DVD (\$50), Nascar Collection (\$150), 3 Clocks(\$20)	j	390.00
6. Wearing apparel.		Normal clothing (\$300)	J	300.00
7 Furs and jewelry.		3 watches (\$75), Wedding Rings (\$25)	J	100.00
8. Treatms and sports, photo- graphic, and other hobby equipment		3 bicycles (\$200), Camping Gear (\$100)	J	300.00
Interests in insurance policies Name insurance company of each policy and nemize surrender or refund value of each	x			
10. Annuities, Itemize and name each issuer	×			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars (File separately the record(s) of any such linearized for the second state of the	×			

B 0B (Official Form 6B) (12/07) Cont.		
In re	Angenetta & Cary Coogan	,	Case No.
	Debtor		(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WITE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA, Bank of America, Bend, OR	w	50.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	×			
14. Interests in partnerships or joint ventures. Itemize.	×			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	×			
16. Accounts receivable.	×			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	×			
Other liquidated debts owed to debtor including tax refunds. Give particulars.	x			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A — Real Property.	x			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	×			

B 6B (Official Form 6	6B) (12/07) Cont.
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In re	Angenetta & Cary Coogan	
	7 7	

Case No.	
	(If known)

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIPE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	х			
23. Licenses, franchises, and other general intangibles. Give particulars.	x			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		89 Buick Lesabre (\$800) owned 93 Nissan PU (\$1000) owned	ı	1,800.00
26. Boats, motors, and accessories.	x			
27. Aircraft and accessories.	Х		ľ	
28. Office equipment, furnishings, and supplies.		Desk (\$50), Printer (\$50)	J	100.00
29. Machinery, fixtures, equipment, and supplies used in business.	x			
30. Inventory.	x			
31. Animals.		Cocker/Shitzu Mix	J	200.00
32. Crops - growing or harvested. Give particulars.	x			
33. Farming equipment and implements.	x			
34. Farm supplies, chemicals, and feed.	х			
35. Other personal property of any kind not already listed. Itemize.				
		continuation sheets attached	Total➤	\$ 5,180.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re	Angenetta & Cary Coogan	
	Debtor	

Case No.	
	(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ 11 U.S.C. § 522(b)(2) ☐ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Unemployment Cary	ORS 657.855; 18.348	960.00	960.00
Cash on Hand Checking/Savings	ORS 18.385	240.00	240.00
Real Property 19930 Limelight Dr, #415	ORS 18.428(5)	27,000.00	27,000.00
Household goods, Furnishings and Provisions	ORS 18.345 (1) (f)	1,700.00	1,700.00
Child Support	ORS 18.345 (1) (i)	223.00	223.00
Books, Pictures	ORS 18.345 (1) (a)	390.00	390.00
Wearing apparel jewelry	ORS 18.345 (1) (b)	400.00	400.00
Bicycles, Camping Gear	ORS 18.345 (1) (o)	300.00	300.00
Domestic Animal	ORS 18.345 (1) (e)	200.00	200.00
Wages	ORS 18.385	2,000.00	2,000.00
IRA Bank of America	ORS 18.358	50.00	50.00

B 6C (Official Form 6C) (12/07)	B 60	(Official For	m 6C) (12/07	١
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In re	Angenetta & Cary Coogan	

Case No.	
	(If known)

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor cla	ims the exempti	ons to which deb	tor is entitled under:
(Check on	e box)		

☐ 11 U.S.C. § 522(b)(2) ☐ 11 U.S.C. § 522(b)(3)

 \square Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Nissan Pickup	ORS 18.345 (1) (d)	1,000.00	1,000.00
Buick LeSabre	ORS 18.345 (1) (d)	800.00	800.00
Office Equipment	ORS 18.348 (1) (o)	100.00	100.00

B 6D (Official Form 6D) (12/07)			
In re	,	Case No.	
Debtor			(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

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Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

continuation sheets attached			VALUE \$ Subtotal ► (Total of this page) Total ► (Use only on last page)				\$ (Report also on Summary of	\$ (If applicable, report
			Subtotal ► (Total of this page)				\$	
· ·							·	
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ACCOUNT NO.				l				
			VALUE \$					
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ACCOUNT NO.			V111021					
			VALUE \$					
							,	
ACCOUNT NO.			SUBJECT TO LIEN					
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY

B 6E (Official Form 6E) (12/07)	
In re Angenetta & Cary Coogan	Case No.
Debtor	(if known)
SCHEDULE E - CREDITORS HOLDING	UNSECURED PRIORITY CLAIMS
A complete list of claims entitled to priority, listed separately by type of priority unsecured claims entitled to priority should be listed in this schedule. In the box including zip code, and last four digits of the account number, if any, of all entitidebtor, as of the date of the filing of the petition. Use a separate continuation should be account number.	es provided on the attached sheets, state the name, mailing address es holding priority claims against the debtor or the property of the
The complete account number of any account the debtor has with the creditor debtor chooses to do so. If a minor child is a creditor, state the child's initials an "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name.	d the name and address of the child's parent or guardian, such as
If any entity other than a spouse in a joint case may be jointly liable on a cla entity on the appropriate schedule of creditors, and complete Schedule H-Codeb both of them, or the marital community may be liable on each claim by placing a Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the than one of these three columns.)	tors. If a joint petition is filed, state whether the husband, wife, an "H," "W," "J," or "C" in the column labeled "Husband, Wife, a labeled "Contingent." If the claim is unliquidated, place an "X" in
Report the total of claims listed on each sheet in the box labeled "Subtotals" E in the box labeled "Total" on the last sheet of the completed schedule. Report	
Report the total of amounts entitled to priority listed on each sheet in the box entitled to priority listed on this Schedule E in the box labeled "Totals" on the la primarily consumer debts report this total also on the Statistical Summary of Cer	st sheet of the completed schedule. Individual debtors with
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the amounts not entitled to priority listed on this Schedule E in the box labeled "Tota with primarily consumer debts report this total also on the Statistical Summary of	als" on the last sheet of the completed schedule. Individual debtors
Check this box if debtor has no creditors holding unsecured priority claims	to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims i	n that category are listed on the attached sheets.)
Domestic Support Obligations	
Claims for domestic support that are owed to or recoverable by a spouse, for responsible relative of such a child, or a governmental unit to whom such a dome 11 U.S.C. § 507(a)(1).	
Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the debtor's business or financial affair appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).	s after the commencement of the case but before the earlier of the
☐ Wages, salaries, and commissions	
Wages, salaries, and commissions, including vacation, severance, and sick leav independent sales representatives up to \$10,950* per person earned within 180 dicessation of business, whichever occurred first, to the extent provided in 11 U.S. Contributions to employee benefit plans	ays immediately preceding the filing of the original petition, or the
Money owed to employee benefit plans for services rendered within 180 days i cessation of business, whichever occurred first, to the extent provided in 11 U.S.	

In re Angenetta & Cary Coogan	_ , Case No
Debtor	(if known)
☐ Certain farmers and fishermen	
	rmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,425* for deposits for the purchathat were not delivered or provided. 11 U.S.C. § 507(a)(7).	ase, lease, or rental of property or services for personal, family, or household use,
☑ Taxes and Certain Other Debts Owed to Governmental U	Units
Taxes, customs duties, and penalties owing to federal, state, an	nd local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Dep	ository Institution
	the Office of Thrift Supervision, Comptroller of the Currency, or Board of or successors, to maintain the capital of an insured depository institution. 11 U.S.C.
Claims for Death or Personal Injury While Debtor Was I	Intoxicated
Claims for death or personal injury resulting from the operation drug, or another substance. 11 U.S.C. § 507(a)(10).	n of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a
* Amounts are subject to adjustment on April 1, 2010, and every	three years thereafter with respect to cases commenced on or after the date of
adjustment.	
α	ontinuation sheets attached

B 6E (Official Form 6E) (12/07) – Cont.			
In re	Angenetta & Cary Coogan	_ ,	Case No.	
	Debtor	_	(if known)	

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No. 522-19-1977 IRS Columbus, Ohio 43266		н	2001-2007 income tax/ federal liability & interest	x			2,198.00	1,098.31	1,099.69
Account No. 522-19-1977 State of Oregon Dept. of Revenue Salem, Oregon 97317		н	2001-2007 income tax/state liability & interest	x			5,600.98	3,460.69	2,140.29
Account No.									
Account No.									
Sheet noof continuation sheets attached to Schedule of Creditors Holding Priority Claims (Totals of this page) Total> (Use only on last page of the completed					age) al⊁	\$ 4,559.00 \$ 7,798.98	\$ 4,559.00	3,239.98	
			Schedule E. Report also of Schedules.) (Use only on last page of the Schedule E. If applicable, the Statistical Summary of Liabilities and Related Da	the com , report f Certain	Total pleted also on	ls➤	7,790.90	\$ 4,559.00	\$ 3,239.98

Bor (Official Form 6F) (12/07)	
In re	Cary S & Angenetta M Coogan Debtor	Case No(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 101573****		Н	09/2006 C/O Dish Network				1.00
AFNI, Inc PO Box 3427 Bloomington, IL 61702-3427			Satellite Bill				
ACCOUNT NO. 1011706499	х	w	03/2007 co-signer on auto loan				19,831.00
Chrysler Financial PO Box 9223 Farmington Hills, MI 48333-9223			co-signer on auto loan				
ACCOUNT NO. 19881 Rocking Ho		н	07/2008				78.00
Avion Water 60813 Parrell Road Bend, OR 97702-2599			Water bill				
ACCOUNT NO. 1977		н	07/2007				49.00
Bend Dental Group 660 NE 3rd Street, Suite 3 Bend, OR 97701			dental bill				
					Sub	total➤	s 19,959.00
continuation sheets attached		(Report a	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabi	licable, o	ed Sched n the Sta	tistical	s

B6F (Official Form 6F) (12/07) - Cont.			
In re	Cary S & Angenetta M Coogan	,	Case No.	
_	Debtor			(if known)

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 543138803		н	02/2006				38,577.00
Sallie Mae PO Box 9500 Wilkes-Barre, PA 18773-9500			Student Loan				
ACCOUNT NO. 522191977		н	09/2002				1,500.00
Sears Card Natinoal Acct Auth Center 13200 Smith Road Middleburg Heights, OH 44130-7802			credit Card				
ACCOUNT NO. 522191977		н	09/2001-09/2007				2,199.00
Internal Revenue Service ACS Support PO Box 24017 Fresno, CA 93779-4017			Tax Debt				
ACCOUNT NO. 522191977		н	09/2001-09/2007				3,141.00
State of Oregon Revenue Dept PO Box 14725 Salem, OR 97309-5018			tax debt				
ACCOUNT NO.							
Sheet noof continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						total➤	\$ 45,417.00
Total> (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)						lule F.)	s

B6F (Official Form 6F) (12/07)		
In re Cary S & Angenetta M Coogan Debtor	 Case No.	(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 522191977		н	03/2008				389.00
Bend Memorial Clinic PO Box 6048 Bend, OR 97708-6048			Medical Bills				
ACCOUNT NO. 19881 Rocking Horse		н	07/2008				31.00
Cascade Disposal 1300 SE Wilson Avenue bend, OR 97702			Garbage Bill				
ACCOUNT NO. 101573****		н	09/2006 Sate Wite Bill				77.00
Dish Network Dept 0063 Palatine, IL 60055-0063			Satellite Bill				
ACCOUNT NO. 19881 Rocking Hors		н	08/2008				276.00
Pacific Power 1033 NE 6th Avenue Portland, OR 97256-0001			Electric Bill				
		<u> </u>			Sub	total>	\$ 773.00
continuation sheets attached					S		

B6F (Official Form 6F) (12/07) - Cont.		
In re	Cary S & Angenetta M Coogan	Case No.	
	Debtor		(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6129** Quick Collect Inc PO Box 55457 Portland, OR 97238-5457		н	07/2007 Dental Bill Collection				1.00
ACCOUNT NO. 33283022 Arrow Financial Services/AFS Vassignee of Cortrust 5996 W Touhy Avenue Niles, IL 60714-4610		w	12/2005 Credit Card Collections				569.00
ACCOUNT NO. 2925613 Atlantic Credit & Finance PO Box 13386 Roanoke, VA 24033		w	12/2006 Credit Card Collection				1,174.00
ACCOUNT NO. 543138803 Bend Anesthesilogy Group, PC PO Box 4008 Portland, OR 97208-4008		w	03/2008 Medical Bill				600.00
ACCOUNT NO. 543138803 Bend Memorial Clinic PO Box 6048 Bend, OR 97708-6048		w	03/2008 medical Bill				800.00
Sheet noof continuation sheets atte to Schedule of Creditors Holding Unsecur Nonpriority Claims	ached ed					total≯	s 3,144.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)					-		

B6F (Official Form 6F) (12/07)			
In re	Cary S & Angenetta M Coogan	,	Case No.	
	Debtor			(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no	☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.						
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 543138803		w	03/2008				1,700.00
Bend Surgery Center PO Box 6329 Bend, OR 97708-9913			Medical Bills				
ACCOUNT NO. 618R980766		w	02/2008				1.00
Book of the Month Club PO Bxo 916401 Indianapolis, IN 46291-6401			Book Club				
ACCOUNT NO. 620621028154610		w	08/2006 Auto Loan				8,173.00
Capital One Auto Finance 3905 Dallas Pkwy Dallas, TX 75093			Auto Loan				
ACCOUNT NO. 5291072199647336		w	08/2008 Credit Card				1,585.00
Capital One Credit Card PO Box 30281 Salt Lake City, UT 84130-0281			Oregin Card				
					Sub	total➤	s 11,459.00
continuation sheets attached			s				

In re	Cary S & Angenetta M Coogan	, Case No.	
	Debtor		(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 609R858419		w	02/2008				1.00
One Spirit PO Bxo 916401 Indianapolis, IN 46291-6401			Book club				
ACCOUNT NO. 543138803		w	08/2006				310.00
Oregon Dept of Revenue PO Bxo 14725 Salem, OR 97309-5018			College Debt/Collections				
ACCOUNT NO. 609R858419		w	02/2008				139.00
RJM Acquistions LLC575 Underhill Blvd Suite 224 Syosset, NY 11791			Book club Collection				
ACCOUNT NO. 618R980766		w	11/2005 Collection				132.00
RJM Acquistions LLC575 Underhill Blvd Suite 224 Syosset, NY 11791							
ACCOUNT NO. 2647964500003		w	06/2008				1.00
Fingerhut 6250 ridgewood Rd Saint Cloud, MN 56395			Catalog Credit Account				
Sheet no. of continuation sheets att to Schedule of Creditors Holding Unsecut Nonpriority Claims	ached				Sub	total➤	\$ 583.00
Total ➤ (Use only on last page of the completed Schedule P.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)				s			

B6F (Official Form 6F) (12/07)	
In re Cary S & Angenetta M Coogan ,	Case No(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no	☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.						
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2647964500003		w	06/2008				563.00
Jefferson Capital System 16 McLeland Road Saint Cloud, MN 56303			Catalog Credit account				
ACCOUNT NO. 6206210281546100		w	08/2006				1.00
Key Bank NA for Capital One PO Box 94825 Cleveland, OH 44101			Auto Loan				
ACCOUNT NO. 529107219964733		w	11/2005 Book Club				1.00
Double Day Books PO Box 916401 Indianapolis, IN 46291-6401			Book Club				
ACCOUNT NO. 2001999		w	06/2006				1,462.00
Les Schwab PO Box 667 Prineville, OR 97754-0667			Tire Account				
					Sub	total>	s 2,027.00
continuation sheets attached		(Report a	(Use only on last page of the also on Summary of Schedules and, if appl Summary of Certain Liabil	icable, o	ed Scheo n the Sta	itistical	s

In re	Cary S & Angenetta M Coogan	

De	btor

Case No.	
	(if known)

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 331935		w	09/2005				1.00
Collection Bureau-Walla Walla 224 E Poplar St PO Box 1756 Walla Walla, Wa 99362-3031			Cell Phone Bill				
ACCOUNT NO. 543138803		w	08/2006				1.00
Central Oregon Pathology 1348 NE Cushing Drive Bend, OR 97701	1		Medical Bill				
ACCOUNT NO. 543668100123562		w	07/2006				1.00
Cortrust Bank PO Box 5253 Carol Stream, IL 60197			Credit Card				
ACCOUNT NO. 3153	<u> </u>	w	12/2007				110.00
Diamond Parking City of Bend PO Box 1252 Bend, O 97709-1252			Traffic Ticket				
ACCOUNT NO. 522191977		н	02/2007				1,699.00
St Charles Medical Center 2500 NE Neff Road Bend, OR 97701			Medical Bills				
Sheet noof continuation sheets att to Schedule of Creditors Holding Unsecut Nonpriority Claims	ached red				Sul	ototal➤	\$ 1,812.00
		(Report	(Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liab	olicable c	ed Sche	atistical	s

B6F (Official Form 6F) (12/07)	
In re Cary S & Angenetta M Coogan Debtor	Case No(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 522191977		н	02/2007				2.00
Central Oregon Radiology Assc 1460 NE Medical Center Dr Bend, OR 97701			Medical Bills				
ACCOUNT NO. 522191977		н	02/2002				1,200.00
Texaco PO Box 530950 Atlanta, GA 30353-0950			Gas Credit Card	 			
ACCOUNT NO. 543138803		J	10/2008				15,999.00
Credit Concepts 220 West 7th Avenue Eugene, OR 97401			Auto Loan				
ACCOUNT NO. 543138803		J	09/2008				3,898.00
Aaron's 1900 NE 3rd Street Bend, OR 97701			TV Lease				
		-			Sub	total➤	\$ 21,099.00
continuation sheets attached				S			

In re	Cary S 8	Angenetta M	Coogan	

6if	known)	
	KIIU WIII)	

Case No.

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8803 All Women's Care 25 NE Louislana Avenue bend, OR 97701		w	08/2006 Medical Bill				99.00
ACCOUNT NO. 865R600992 RJM Acquisitions LLC575 Underhill Blvd Suite 224 Syosset, Ny 11791		w	11/2005 Book Club Collection				122.00
ACCOUNT NO. 543138803 St Charles Medical Center 2500 Ne Neff Road bend, OR 97701		w	03/2003 Medical Bills				1,563.00
ACCOUNT NO. 543138803 Valley Credit Services 960 Broadway NE, Suite 4 PO 2046 Salem, OR 97301		w	09/08 Medical Bill Collection				693.00
ACCOUNT NO. 543138803 Hertz Car Sales 535 Northeast Savannah Drive Bend, OR 97701		J	09/2008 Car Down Payment/Check			(1;250.00
Sheet noof continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Total> (Use only on last page of the completed Schedule F.)						Γotal➤	\$ 3,727.00 \$

B6F (Official Form 6F) (12/07)	
In re Cary S & Angenetta M Coogan , Debtor	Case No(if known)
SCHEDULE F - CREDITORS HOLDING U	NSECURED NONPRIORITY CLAIMS
State the name, mailing address, including zip code, and last four digits of any acc the debtor or the property of the debtor, as of the date of filing of the petition. The useful to the trustee and the creditor and may be provided if the debtor chooses to daddress of the child's parent or quardian, such as "A.B. a minor child, by John Doe	complete account number of any account the debtor has with the creditor is o so. If a minor child is a creditor, state the child's initials and the name and

R, Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

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☐ Check this box if debtor has no	creditor	s holding uns	ecured claims to report on this Sched	ule F.		,	F***
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 522191977		н	09/2008				1,500.00
State of Oregon Employment Dept 875 Union St NE Salem, OR 97311			Unemployment Benefits				1,000
ACCOUNT NO. 522191977		н	02/2005				500.00
GC Services Limited Partnership PO Box 721660 Oklahoma City, OK 73172			Tax Debt Collection				
ACCOUNT NO. 543138803		J	09/2008				100.00
Cross Check, Inc PO Box 6008 Petaluma, CA 94955-6008			Check Debt/Stop Payment				
ACCOUNT NO. 130-007946		J	11/08				10,061.64
Approved Credit 1543 NE 3rd St Bend, OR 97701			Car Loan				
Subtotal➤					total➤	\$ 12,161.64	
continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					ule F.) tistical	\$.	

B 01 (C	Official Form 6F) (12/07)	
In re	Angenetta & Cary Coogan,	Case No
	Debtor	(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 543138803			Natural Gas				
Cascade Natural Gas 222 Fairview Ave. N. Seattle, WA 98109		J	Aug. 2008				300.00
ACCOUNT NO. 522-19-1977			Cellphone				
Sprint PO Box 660075 Dallas, TX 75266-0075		J	March 2008				300.00
ACCOUNT NO. 543138803			Garbage Bill				
Bend Garbage PO Box 504 Bend, OR 97709		J	March 2003				70.00
ACCOUNT NO. limelight dr #415 Jeanette Sears 60906 Ridge Drive Bend, OR 97702		J	House Purchase Dec. 2008 Any interest				0.00
Subtotal➤					total➤	\$	
continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)				ule F.) tistical	\$ 670.00		

B6F (Official Form 6F) (12/07)	
In re Cary S & Angenetta M Coogan Debtor	Case No(if known)
SCHEDULE F - CREDITORS HOLDING I	UNSECURED NONPRIORITY CLAIMS
State the name, mailing address, including zip code, and last four digits of any ac	ccount number, of all entities holding unsecured claims without priority ag

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.							
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 543138803		J	Rent				3,200.00
Central Oregon Leasing and Management 1250 NE 3rd Street Bend, OR 97701			August 2008				
ACCOUNT NO. 543138803		w	Cable				251.00
Bend Broadband 63090 Sherman Road Bend, OR 97701			March 2003				
ACCOUNT NO. 543138803		J	Electric				151.00
Central Oregon Electric 1638 NW Larch Ave Redmond, OR 97756			March 2003				
ACCOUNT NO. 543138803		J	Water & Sewer				200.00
City of Bend, water & sewer 575 NE 15th St Bend, OR 97701			August 2008				
Subtotal>						total>	s 3,802.00
continuation sheets attached				ule F.) tistical	5 me		

In re	Angenetta & Cary Coogan	,	Case No.	
•	Debtor			(if known)

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. 5413303989			Dec. 2007					
Tmobile PO Box 742596 Cincinnati, OH 45274-2596		w	Cellphone				1,000.00	
ACCOUNT NO. 543138803			Jan. 2008					
Dept. of Education PO Box 7063 Utica, NY 13504-7063		w	Student Loan				2,770.00	
ACCOUNT NO. C59 931600303			Nov. 2009					
Central. OR Emergency Phys 9301 S Western Ave Oklahoma City, OK 73139		w	w	ER Bill				282.00
ACCOUNT NO. 0931600303			Nov. 2009					
St Charles Medical Center PO Box 6095 Bend, OR 97708		w	w	ER Bill				790.00
ACCOUNT NO. 966611			May 2005					
GCS 2724 West Main St. Medford, OR 97501		н	Electric Bill				200.00	
Sheet noof continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal➤			total➤	5,042.00				
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data)					\$			

B 91 (O	ifficial Form 6F) (12/07)			
In re	Angenetta & Cary Coogan	,	Case No.	
	Debtor			(if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.										
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM			
ACCOUNT NO. C59 931300180			Nov. 2009							
Central OR Emergency Phys 9301 S Western Oklahoma City, OK 73139		н	ER Bill				627.00			
ACCOUNT NO. 2689		May. 2009 Chiropractor	May. 2009							
Jeffrey Craig, D.C. P.C. 875 SE 3rd St., Ste. 102 Bend, OR 97702			н	н	н	н	Chiropractor			
ACCOUNT NO. P232464			July 2009	_			_			
Bend Memorial Clinic PO Box 6048 Bend, OR 97708		н	Dr. Bill				258.34			
ACCOUNT NO. P278359			Jan. 2009							
Bend Memorial Clnic PO Box 6048 Bend, OR 97708		w	Dr. Bill				700.00			
					Subt	otal>	\$ 1,665.34			
continuation sheets attached (Use only on last page of the completed Sch (Report also on Summary of Schedules and, if applicable, on the S Summary of Certain Liabilities and Relat			ed Sched	istical	\$					

In re	Angenetta & Cary Coogan	Case No.	
	Debtor	 (if known)	

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. Limelight Dr. 415			Dec. 2009					
Deschutes County Assessor 1300 NW Wall Street, Suite 2 Bend, OR 97701		J	Interest & Service Charges from Property Taxes				414.30	
ACCOUNT NO. 02637522			Jan. 2008					
PCS PO Box 5849 Bend, OR 97708		J	Collection from Bend Memorial Clinic & Bend Surgery Center				5,000.00	
ACCOUNT NO. 147338-3			Jan. 2005					
Bend Broadband 63090 SHERMAN RD. BEND, OR 97701-5750		J	Cable				200.00	
ACCOUNT NO. limelight Dr #415			Dec. 2008					
Romaine Village 19940 Mahogany Drive Bend, OR 97702-9113		J	J	Jan, Feb & March Space rent for Mobile Home and late fees				1,032.00
ACCOUNT NO. davis.coogan			Dec. 2005					
Pilot Butte Dental 1909 Northeast Neff Road Bend, OR 97701-6114	J	J		Dental Office				952.00
Sheet no. of continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims Subtotal➤					total➤	s 7,598.30		
Total ➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)				\$				

B 6F (O	fficial Form 6F) (12/07)		
In re_	Angenetta & Cary Coogan Debtor	,	Case No (if known)

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.												
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM					
ACCOUNT NO. 000000			Sept. 2009									
Carolyn Coogan 13794 E. 45th Dr. Yuma, AZ 85367		J	Personal Loan				10,000.00					
ACCOUNT NO. 61953211-0019			Dec. 2008									
Pacific Power 1033 NE 6th Ave Portland, OR 97256-0001		w	w	w	w	w	W Ele	Electric Bill				1,000.00
ACCOUNT NO. 654455-413760			Dec. 2008									
City of Bend PO Box 877 Bend, OR 97709		J	J	Sewer Bill				100.00				
ACCOUNT NO. R-26146078			Dec. 2007		_							
ER Solutions, Inc. PO Box 9004 Renton, WA 98057		W	Cell Phone				1,000.00					
					Sub	total➤	\$ 12,100.00					
continuation sheets attached Total➤ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			ule F.)	s 152,535,28								
A				AMC								

B 6G (Official Form 6G) (12/07)	
In re Angenetta & Cary Coogan , Debtor	Case No(if known)
SCHEDULE G - EXECUTORY CON	TRACTS AND UNEXPIRED LEASES
interests. State nature of debtor's interest in contract, i.e., "I lessee of a lease. Provide the names and complete mailing a minor child is a party to one of the leases or contracts, stat	nexpired leases of real or personal property. Include any timeshal Purchaser," "Agent," etc. State whether debtor is the lessor or addresses of all other parties to each lease or contract described. e the child's initials and the name and address of the child's parer rdian." Do not disclose the child's name. See, 11 U.S.C. §112 and
Check this box if debtor has no executory contracts or unexp	pired leases.
NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B 6H (Official Form 6H) (12/07)	
In re Angenetta & Cary Coogan ,	Case No.
Debtor	(if known)
SCHEDULE H	I - CODEBTORS
debtor in the schedules of creditors. Include all guarantors and co-signer commonwealth, or territory (including Alaska, Arizona, California, Idahe Wisconsin) within the eight-year period immediately preceding the commondebtor spouse who resides or resided with the debtor in the community prondebtor spouse during the eight years immediately preceding the commonlid's initials and the name and address of the child's parent or guardian, child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).	ther than a spouse in a joint case, that is also liable on any debts listed by the s. If the debtor resides or resided in a community property state, b, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or nencement of the case, identify the name of the debtor's spouse and of any property state, commonwealth, or territory. Include all names used by the nencement of this case. If a minor child is a codebtor or a creditor, state the such as "A.B., a minor child, by John Doe, guardian." Do not disclose the
Check this box if debtor has no codebtors.	
NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Gayle Davis PO Box 872 Florence, OR 97439	

B6I	Official	Form 6I	(12/97)
DOL	OHICIAI	LOLMI OI] (12/0/)

`	, , ,	
In re	Angenetta & Cary Coogan,	Case No
	Debtor	(if known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital	DEPENDENTS OF DEBTOR AND SPOUSE					
Status: Married	RELATIONSHIP(S): Aaron Davis, Son	AGE(S): 16				
Employment:	DEBTOR		_	S	POUSE	
Occupation Uner	mployed	Unen	nployed			
Name of Employer		+	···			
How long employe						
Address of Employ						
Address of Employ						
ICOME: (Estimate	of average or projected monthly income at time	DEBTO	OR	SPOU	'SE	
case	filed)		0.00	•	0.00	
Monthly	lan, and commissions	\$	0.00	\$	0.00	
Monthly gross wa (Prorate if not page 1)	ges, salary, and commissions	•		•		
Estimate monthly		Φ		Ψ		
SUBTOTAL		\$	0.00		0.00	
LESS PAYROLL	DEDUCTIONS					
a. Payroll taxes a		\$		\$		
b. Insurance	•	\$		\$		
c. Union dues		\$		\$		
d. Other (Specify):	\$		\$		
SUBTOTAL OF I	PAYROLL DEDUCTIONS	\$	0.00	\$	0.00	
TOTAL NET MO	NTHLY TAKE HOME PAY	\$	0.00	\$	0.00	
Regular income fr (Attach detailed	om operation of business or profession or farm	\$				
Income from real		\$		\$		
Interest and divide		\$		\$		
the debtor's us	nance or support payments payable to the debtor for se or that of dependents listed above	\$		\$		
(0 10)	r government assistance			•		
2. Pension or retires	ment income	\$		3		
3. Other monthly in	come	\$		\$		
(Specify).Chil	d support	\$	223.00	\$	960.00	
	mployment					
. SUBTOTAL OF	LINES 7 THROUGH 13	\$	0.00	\$	0.00	
S. AVERAGE MO	NTHLY INCOME (Add amounts on lines 6 and 14)	\$	223.00		960.00	
6. COMBINED AV	ERAGE MONTHLY INCOME: (Combine column		\$	1,183 <u>.0</u>	<u> </u>	
tals from line 15)					dules and, if applicable, Liabilities and Related	Date

Husband lost job in Nov. 2008, wife lost job in Sept. 2009. Receive child support on occasion. Husband receives unemployment benefits.

In re_Angenetta & Car	v Coogan		Case No	
Debtor		,	Case No(if known)	
			,	
SCHEDULE J -	CURRE	NT EXPENDITU	RES OF INDIVIDUAL DEBTOR(S)
			debtor and the debtor's family at time case filed. Prorate any pay expenses calculated on this form may differ from the deductions from	
Check this box if a joint petition is	s filed and debtor	r's spouse maintains a separate	household. Complete a separate schedule of expenditures labeled	"Spouse."
Rent or home mortgage payment (include)	e lot rented for m	nobile home)	\$_	441.00
a. Are real estate taxes included?		• /		
b. Is property insurance included?	Yes	No		
2. Utilities: a. Electricity and heating fuel			\$_	156.00
b. Water and sewer			\$_	38.00
c. Telephone			s _	40.00
d. Other_Cable				96.00
3. Home maintenance (repairs and upkeep)			\$_	100.00
4. Food			\$	360.00
5. Clothing			s	50.00
5. Laundry and dry cleaning			\$	20.00
7. Medical and dental expenses			\$_	0.00
3. Transportation (not including car payment	nts)		\$	0.00
P. Recreation, clubs and entertainment, new	spapers, magazi	nes, etc.	s _	0.00
10.Charitable contributions			\$	0.00
11.Insurance (not deducted from wages or i	ncluded in home	mortgage payments)		
a. Homeowner's or renter's			s	60.00
b. Life			s	0.00
c. Health			\$	0.00
d. Auto			\$	120.00
e. Other			<u> </u>	
2. Taxes (not deducted from wages or incl Specify) Property taxes	uded in home me	ortgage payments)	s	38.00
3. Installment payments: (In chapter 11, 12	2, and 13 cases, o	do not list payments to be include	led in the plan)	
a. Auto			\$	0.00
b. Other				0.00
c. Other				0.00
4. Alimony, maintenance, and support paid				0.00
5. Payments for support of additional depe	ndents not living	g at your home	s	0.00
				0.00
6. Regular expenses from operation of bus	iness, profession	i, or farm (attach detailed statem	ent) \$	0.00

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

Loss of Job and we are currently getting food stamps to help with Food.

STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	1,183.00
b. Average monthly expenses from Line 18 above	\$	1,519.00
c. Monthly net income (a. minus b.)	\$	-336.00

B6 Declaration (Official Form 6 - Declaration) (12/07)		
In re Angenetta & Cary Coogan Debter	Case No(if known)	

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARA	TION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR
I declare under penalty of perjury that I have my knowledge, information, and belief.	read the foregoing summary and schedules, consisting of 31 sheets, and that they are true and correct to the best of
Date 3-4-10	Signature: Angeretta Couge
Date 3-4-10 Date 3-4-10	Signature: (Joint Debtor, Many)
	[If joint case, both spouses must sign.]
DECLARATION AND SIG	NATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
the debtor with a copy of this document and the notice promulgated pursuant to 11 U.S.C. § 110(h) setting a	ankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided es and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been maximum fee for services chargeable by bankruptcy petition preparers, 1 have given the debtor notice of the maximum a debtor or accepting any fee from the debtor, as required by that section.
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
	al, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner
Address	
X Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other indiv	iduals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
If more than one person prepared this document, atta	ch additional signed sheets conforming to the appropriate Official Form for each person.
A bankruptcy petition preparer's failure to comply with the 18 U.S.C. § 156.	e provisions of title 11 and the Federal Rules of Bankrupicy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110;
DECLARATION UNDER P	ENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
I, the	[the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have ting of 31 sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my
Date	Signature:
	[Print or type name of individual signing on behalf of debtor.]
	or corporation must indicate position or relationship to debtor.]
	property: Fine of up to \$500.000 or imprisonment for up to 5 years or both. 18 U.S.C. 88 152 and 3571.

B 7 (Official Form 7) (12/07)

United States Bankruptcy Court

T	Angenetta & Cary Coogan	Core No.
ın re:_	Debtor	, Case No (if known)
	STA	EMENT OF FINANCIAL AFFAIRS
inform filed. should affairs. child's	ormation for both spouses is combation for both spouses whether or An individual debtor engaged in b provide the information requeste. To indicate payments, transfers	d by every debtor. Spouses filing a joint petition may file a single statement on which led. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish of a joint petition is filed, unless the spouses are separated and a joint petition is not siness as a sole proprietor, partner, family farmer, or self-employed professional, on this statement concerning all such activities as well as the individual's personal d the like to minor children, state the child's initials and the name and address of the minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C.
additio	omplete Questions 19 - 25. If the	eted by all debtors. Debtors that are or have been in business, as defined below, also nswer to an applicable question is "None," mark the box labeled "None." If o any question, use and attach a separate sheet properly identified with the case name, f the question.
		DEFINITIONS
the fili of the self-en	lual debtor is "in business" for the ng of this bankruptcy case, any of voting or equity securities of a con apployed full-time or part-time. An es in a trade, business, or other act	usiness" for the purpose of this form if the debtor is a corporation or partnership. An urpose of this form if the debtor is or has been, within six years immediately preceding the following: an officer, director, managing executive, or owner of 5 percent or more praction; a partner, other than a limited partner, of a partnership; a sole proprietor or individual debtor also may be "in business" for the purpose of this form if the debtor ity, other than as an employee, to supplement income from the debtor's primary
5 perce	elatives; corporations of which the	cludes but is not limited to: relatives of the debtor; general partners of the debtor and ebtor is an officer, director, or person in control; officers, directors, and any owner of ecurities of a corporate debtor and their relatives; affiliates of the debtor and insiders he debtor. 11 U.S.C. § 101.
	1. Income from employment	or operation of business
None	e the debtor has received from employment, trade, or profession, or from operation of part-time activities either as an employee or in independent trade or business, from the or the date this case was commenced. State also the gross amounts received during the gross calendar year. (A debtor that maintains, or has maintained, financial records on calendar year may report fiscal year income. Identify the beginning and ending dates oint petition is filed, state income for each spouse separately. (Married debtors filing the petition is not filed.)	
	AMOUNT	SOURCE
	\$32,684.00	2008-2009 Bend Memorial Clinic, Employment
	402,001.00	

2.	Income other	than from emp	lovment or o	peration of busines
	income other	mun mom cmp	to juicut or o	beinging of pasines

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

Complete a. or b., as appropriate, and c.

Non

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT

PAID

AMOUNT

STILL OWING

None

7

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING $\mathbf{\nabla}$

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATE OF AND RELATIONSHIP TO DEBTOR

PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

V

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

STATUS OR

AND LOCATION

DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

П

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

Credit Concepts & Approved Auto Eugene, OR & Bend, OR

10/13/2009

Chrysler, Subaru, \$18313.00

6. Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE Of PROPERTY

7. Gifts



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON

OR ORGANIZATION

RELATIONSHIP TO DEBTOR,

IF ANY

DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses



List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

 \square

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DESCRIBE PROPERTY TRANSFERRED AND

DATE

VALUE RECEIVED

V

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S

INTEREST IN PROPERTY

11. Closed financial accounts



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF

DATE OF TRANSFER OR SURRENDER,

CONTENTS IF ANY

13. Setoffs



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

1865 NE Jackson, Bend, OR 97701

Coogan

08/2008-12/2008

19881 Rocking Horse Rd, Bend, OR 97702

Coogan, Davis

02/2004-08/2008

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME

NAME AND ADDRESS

DATE OF

ENVIRONMENTAL

AND ADDRESS

OF GOVERNMENTAL UNIT

NOTICE

LAW

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME

NAME AND ADDRESS

DATE OF

ENVIRONMENTAL

AND ADDRESS

OF GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

Vone

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing

executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS

OF SOCIAL-SECURITY

BEGINNING AND

NAME

OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS NATURE OF BUSINESS

ENDING DATES

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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

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a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

 \Box

b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

9

	22. Former partners, officers, directors		partnership within one year immediately				
None	a. If the debtor is a partnership, list each preceding the commencement of this case.	member who while whom the	partiership within one year immediates,				
	NAME	ADDRESS	DATE OF WITHDRAWAL				
None	b. If the debtor is a corporation, list all of within one year immediately preceding the	fficers or directors whose relation a commencement of this case.	nship with the corporation terminated				
	NAME AND ADDRESS	TITLE	DATE OF TERMINATION				
Nana	23. Withdrawals from a partnership or		ions credited or given to an insider.				
None	If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.						
	NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY				
	24 Tay Consolidation Group						
None	24. Tax Consolidation Group. If the debtor is a corporation, list the name consolidated group for tax purposes of whi immediately preceding the commencement	ch the debtor has been a member					
	NAME OF PARENT CORPORATION	N TAXPAYER-IDENTIFIC	CATION NUMBER (EIN)				
	-	<u> </u>					
	25. Pension Funds.						
None	25. Pension Funds. If the debtor is not an individual, list the na which the debtor, as an employer, has been preceding the commencement of the case.						

[If completed by an individual or individual and	d spouse]	
I declare under penalty of perjury that I have re and any attachments thereto and that they are tr		in the foregoing statement of financial affairs
Date 3-4-10	Signature of Debtor Signature of	Argenetta Corga
Date 3-4-10	Joint Debtor (if any)	Cory Cogas
[If completed on behalf of a partnership or corporation]	1	
I declare under penalty of perjury that I have read the ans thereto and that they are true and correct to the best of my	swers contained in the foregoin y knowledge, information and	g statement of financial affairs and any attachments belief.
Date	Signature	
	Print Name and Title	
[An individual signing on behalf of a partnersh	nip or corporation must indicate	e position or relationship to debtor.]
col	ntinuation sheets attached	
Penalty for making a false statement: Fine of up to \$500		5 years, or both. 18 U.S.C. §§ 152 and 3571
	- <u></u>	
I declare under penalty of perjury that: (1) I am a bankruptcy petit compensation and have provided the debtor with a copy of this docu 342(b); and, (3) if rules or guidelines have been promulgated pursual petition preparers, I have given the debtor notice of the maximum am the debtor, as required by that section.	tion preparer as defined in 11 U ument and the notices and infor unt to 11 U.S.C. § 110(h) setting	J.S.C. § 110; (2) I prepared this document for mation required under 11 U.S.C. §§ 110(b), 110(h), and g a maximum fee for services chargeable by bankruptcy
Printed or Typed Name and Title, if any, of Bankruptcy Petition Pro	eparer Social-Secur	rity No. (Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the name responsible person, or partner who signs this document.	ne, title (if any), address, and so	ocial-security number of the officer, principal,
Address		
Signature of Bankruptcy Petition Preparer	Date	
Names and Social-Security numbers of all other individuals who prepnot an individual:	pared or assisted in preparing th	nis document unless the bankruptcy petition preparer is
If more than one person prepared this document, attach additional sig	ned sheets conforming to the a	ppropriate Official Form for each person

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A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.